Image# 12950078791 PAGE 1 / 4

FEC FORM 1			EMEN ANIZA						Office	Use Or	nlv		
NAME OF COMMITTEE (in	n full)	(Check if		Example over the	le:If typing, e lines.	type	12FI	E4M5	Office	1	ily		
DelBene fo	or Con	gress		1 1 1		1 1 1			1 1				
ADDRESS (number and street)		PO Box 487											
(Check if address is changed)		Bothell					, WA		98041				
								ا ا			]-[		
				ITY			STATE			ZIP	COD	E	
COMMITTEE'S E-MA (Check if is change	address	S (Please provide phil@seattlecfo.	•	nail addre	ss)								
COMMITTEE'S WEB  (Check if is change	address	RESS (URL)  http://www.delbe	neforcongres	ss.com									
2. DATE 0	M / D D	2012	Y										
3. FEC IDENTIFIC	CATION NUI	MBER	C coo	0459099									
4. IS THIS STATE	MENT	NEW (N)	OR	×	AMENDE	D (A)							
I certify that I have e	examined this	Statement and	to the best o	of my kno	wledge and	belief it	is true,	correct	and co	omplete	<b>).</b>		
Type or Print Name	of Treasurer	Philip E Lloyd											
Signature of Treasure	Philip E i	Lloyd		[E	Electronically	Filed]	Date	01	′ [	12	/ Y		012
NOTE: Submission of		us, or incomplete							the per	nalties	of 2 L	J.S.C.	. §437g.

l U:	ice se nly				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)	
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